

**City of Hastings**  
COUNTY OF BARRY, STATE OF MICHIGAN

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***2026 Tax Billing Authorization Agreement for Automatic Bill Pay***

I hereby authorize the City of Hastings to initiate a debit entry to my checking/savings account indicated below and authorize the depository institution named below to debit the same to such account.

Summer Payment Date: 08/31/2026

Bank Name: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Transit / ABA #: \_\_\_\_\_ Account #: \_\_\_\_\_

Account Type: ☐ **Checking** ☐ **Savings**

Properties with payments returned by the financial institution will be assessed a returned item fee of \$50.00 plus additional penalties & interest if paid after the due date. A new Tax Automatic Bill Pay form must be completed each tax season.

Customer Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Address: \_\_\_\_\_ Property #: \_\_\_\_\_

\_\_\_\_\_  
(Customer Signature)

\_\_\_\_\_  
(Date)

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***Office Use Only***

Date Received: \_\_\_\_\_ Received and Processed by: \_\_\_\_\_